PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10824098

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN										
			(Column	1)	(Column 2)		.]	TYPE		OR	OR SMALL ENTITY										
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE									
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00									
TOTAL CHARGEABLE CLAIMS			<i>W</i> minus 20=		•			X\$ 9=		OR	XS18=										
INDEPENDENT CLAIMS			3 minus 3 =					X43=		OR	X86=										
MÜ	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+145=		OR	+290=										
• If	the difference	in column 1 is	less than zero, enter "0" in col			olumn 2	L	TOTAL		OR	TOTAL	710									
CLAIMS AS AMENDED - PART II										' 	OTHER										
10 4 25 (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL										
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
	Total	. 21	Minus	**	20	=		X\$ 9=		OR	50 X\$18 =	50									
	Independent	• 4	Minus	***	હ	= 1		X43=		OR	200 X86=	200									
_		NTATION OF ME	JLTIPLE DEF	ENDENT	CLAIM		' [+145=		OR	+290=										
	1-10-18							TOTAL		OR	TOTAL										
								ODIT. FEE		,	ADDIT. FEE										
<u>.</u>	·	(Column 1)		(Colur		(Column 3)	1 -		4551	1		ADDI-									
AMENDMENT B		REMAINING AFTER		NUM PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL									
	Total	• AMENDMENT	Minus	**	ron	=	1	X\$ 9=		OR	X\$18=										
	Independent	•	Minus	***		= .	l t	X43=	•	OR	X86=										
٩_	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		[}]	+145=		OR	+290=										
						•	· L	TOTAL			TOTAL										
								DOIT. FEE		OR	ADDIT. FEE										
		(Column 1)		(Colur	nn:2)	(Column 3)	_		•												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
	Total	•	Minus	**		= .		X\$ 9=		OR	X\$18=										
	Independent	•	Minus	***		=		X43=		OR	X86=										
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ľŀ				+290=										
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADD								+145=		OR	TOTAL	•									
	f the "Highest Nut	mber Previously Pa mber Previously Pa	iid For' IN THI iid For' IN THI	S SPACE & S SPACE &	s less that s less tha	n 20, enter "20. n 3, enter "3."		DOIT. FEE L			ADDIT. FEE										
٠.	The "Highest Nurr	nber Previously Pai	d For" (Total or	Independa	ent) is the	highest numbe	er four	nd in the app	ropriate box	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3. enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											